

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|----------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | M M | 52 | 03-01-01 |
| FORMALITY REVIEW | JM | JCB 5641 | 4/25/15 |
| RESPONSE FORMALITY REVIEW | H C | 712 | 07-27-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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